

<p>OFFICE OF THE ATTORNEY GENERAL</p> <p>ADMINISTRATIVE HEARINGS BRANCH</p> <p>Suite 200 1024 Capital Center Dr. Frankfort, KY 40601-8204</p> <p>(502) 696-5442 (502) 573-1009 Fax</p>	<p>COMMONWEALTH OF KENTUCKY</p> <p>ADMINISTRATIVE SUBPOENA</p>	<hr/> <hr/> <hr/> <hr/> <p>Agency and Division</p> <hr/> <hr/> <p>Agency Case No.</p> <hr/> <hr/> <p>Administrative Action No.</p>
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_____ vs.

 Petitioner/Complainant Respondent

TO: _____

PURSUANT TO THE AUTHORITY OF KRS 13B.080(3), YOU ARE HEREBY COMMANDED TO APPEAR:

<p>at the following place:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>on _____</p> <p>_____/____</p> <p>at _____</p> <p>____ m.</p> <p>C Eastern Time</p> <p>C Central Time</p>
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☐ To testify on behalf of _____

☐ To produce the following documents or evidence: _____

☐ To give a deposition.

<hr/> <hr/> Issuing Hearing Officer Division of Administrative Hearings Date: <hr/> <hr/>	<hr/> <hr/> Requesting Attorney or Party Address: <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> Telephone: <hr/> <hr/>
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<p>This is a true copy of the original subpoena, which was delivered to: <hr/></p> <hr/> <p>on the <hr/> day of <hr/> , <hr/> .</p> <p>by: <hr/></p> <p><hr/> (print and sign name)</p> <p>Title: <hr/><hr/></p>
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